DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

inventor (if plura	al names a ention ent	are listed	below) of the s	subject	ne name is listed matter which is OST-PROCESS	claimed and	for which a	patent is
(check one)	į į ,	is attached hereto. was filed on as Application Serial No. and was amended on					 ,	
I hereby state that the claims, as amount						e identified sp	pecification,	including
I acknowledge the accordance with I					s material to the 66.	examination	of this appli	cation ,ir
application(s) for application which have also identified rights certificate(s) which priority is of	patent or designate ed below, s), or any le claimed:	inventor's ed at least by checki PCT interi	or plant breede one country oth ng the box, any national applica	r's righ er than foreign tion ha	19 (a)-(d) or (f) or hits certificate(s), on the United States in application for p living a filing date	r 365(a) of an of America, I atent, invento before that of	y PCT intern listed below, r's or plant br the application	and eeder's on on
COUNTRY	OUNTRY APPLICATION NUMBER		DATE OF FIL		PRIORITY CLA	IMED	CERTIFIE	
JAPAN	2002-349		(day, month, ye 2/12/2002	ear)			ATTACHE	
JAPAN	2002-34	9420	2/12/2002				Yes	_ No
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matter of each of manner provided information as de national or PCT in	ication deathe claims by the firs fined in 37 nternation	signating of this ap t paragrap 7 CFR §1. al filing d	the United State oplication is not oh of 35 U.S.C. of 35 Wished occurrate of this application.	es of Andisclos §112, I red bet cation:	merica, listed belo sed in the prior Ur I acknowledge the ween the filing da	ow and, insofa nited States ap duty to disclo te of the prior	r as the subje plication in the ose material	ct he
U.S. PARENT APPLICATION OR PCT PARENT NUMBER			PARENT FILING DATE (day, month, year)			STATUS (patent and number, pending, abandoned)		
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I hereby claim the	benefit u	nder 35 U	.S.C. §119(e) of	f any U	Inited States provi	sional applica	ation(s) listed	below.
APPLICATION NUMBER(S)				FILIN	NG DATE (day, n	nonth, year)		
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Attorney Docket No. 16CT02158

DECLARATION AND POWER OF ATTORNEY

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application and any patent issued thereon.

SOLE OR FIRST INVENTOR: Full Name: Masatake Nukui Date: Oct. 7. 2003 Tokyo Residence: Citizenship: Japan Post Office Address: GE Yokogawa Medcal Systems, 7-127, Asahigaoka 4-chome, Hino-shi, Tokyo 191-8503, JAPAN SECOND JOINT INVENTOR, IF ANY: Full Name: Shunichiro Tanigawa Date: Oct. 7. 2003 Signature: Junichiro /anigawa Residence:__ Tokyo Citizenship: Japan Post Office Address: GE Yokogawa Medcal Systems, 7-127, Asahigaoka 4-chome, Hino-shi, Tokyo 191-8503, JAPAN THIRD JOINT INVENTOR, IF ANY: Full Name: Signature:___ Date: Residence:

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